PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10796375

CLAIMS AS FILED - PART I SMALL ENTITY OTHER TH												THAN	1	
	<u>. </u>	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Column 2)		TYPE			OR				
TOTAL CLAIMS			32			·		RATE	FEE]	RATĘ	FEE	1	
FOR .			NUMBER FILED		NUM	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00		
TO	OTAL CHARGE	ABLE CLAIMS	32 minus 20=		•	12		X\$ 9=		OR	X\$18=	216:00	ŀ	
IN	DEPENDENT (CLAIMS .	4 minus 3 =		•	/		X43=		OR	X86=	86.0		
ΜL	JLTIPLE DEPE	NDENT CLAIM P	RESÉNT		_			+145=	<u> </u>	7		100		
* If the difference in column 1 is less than zero, enter "0" in column 2										OR	<u> </u>	1070	_	
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	TOTAL	10 F L	00	
		(Column 1)				(Column 3)	SMALL ENTITY				OTHER THAN OR SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	· 36	Minus	 32	ر	=4		X\$ 9=		OR	X\$18=	200. VI	¥	
	Independent	· 4	Minus	4		=	Ī	. X43=		OR	X86=		,	
	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		ľ	+145=			+290=			
				,	•	·	L	TOTAL		OR	TOTAL			
		(Column 1)		(Colum		(Column 3)	. Д	DDIT. FEE		OR	ADDIT. FEE			
		CLAIMS		HIGHE		(Column 3)	Г		ADDI	1 1		4881		
AMENDMENT B		REMAINING AFTER AMENDMENT	_	PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	:	
	Total	•	Minus			=	1	X\$ 9=	•	OR	X\$18=	·		
	Independent	•	Minus .	***		<u> </u>	ſ	X43=		OR	X86=			
	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	PENDENT	CLAIM		t	+145=			+290=			
								TOTAL		OR	TOTAL			
		(Oak 4)					A	DOIT. FEE L		OR ,	ADDIT. FEEL	•	•	
_		(Column 1)		(Colum		(Column 3)	:							
AMENDMENT C		REMAINING AFTER AMENDMENT	•	NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		2	Γ	X\$ 9=		OR	X\$18=			
	Independent	•	Minus	***		=	 	X43=		ŀ	X86=			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR				
• 15	the entry in colu	mn 1 is less than the	entry in colu	mn 2. write "	0° in col:	umn 3.	L	+145= TOTAL	·	OR	+290=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	DOIT. FEE			
Ť	he *Highest Num	nber Previously Paic	For (Total or	Independen	t) is the	highest number	tound	I in the appr	opriate box	in cotu	ımn 1.	:		